



New Jersey Department of Children and Families Policy Manual

Manual:	CP&P	Child Protection and Permanency	Effective Date:
Volume:	V	Health Services	
Chapter:	A	Health Services	4-23-2012
Subchapter:	1	Health Services	
Issuance:	1200	Comprehensive Health Evaluations for Children (CHEC)	

Definitions

11-15-2004

Terms used throughout [CP&P-V-A-1-1200](#) have the following meanings:

- “Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)” Medicaid’s comprehensive and preventive child health services for individuals under the age of 21.
- “Final Evaluation Report” A comprehensive written summary of the child’s available health history; physical, developmental, and mental health findings; interpretation of diagnostic testing; and plan of care including referrals and treatment recommendations. The final evaluation report is completed by the health service provider.
- “Health Care Coordinator” A nursing professional with a minimum credential of licensed Registered Nurse (RN) with a minimum of two years pediatric experience.

Policy

11-15-2004

A community-based network of health service providers has been organized by the NJ Department of Children and Families (DCF), Division of Child Protection and Permanency (CP&P), and Division of Medical Assistance and Health Services (DMAHS). The community-based network consists of health service providers and Regional Diagnostic and Treatment Centers (RDTC). See [CP&P-II-C-2-600](#). The identified health service providers and RDTCs are qualified to provide comprehensive, coordinated health services in a timely, flexible, and culturally sensitive manner.

The focus of CHEC is to deliver comprehensive health evaluation services to children within 30 days of initial out-of-home placement.

Scope of Services

11-15-2004

Health service providers and RDTCs' provide the services listed below. All of the services are provided at one facility and are generally completed in one day. CHEC services include:

- EPSDT Services;
 - Comprehensive health and developmental history
 - Developmental assessment
 - Physical examination (vision and hearing screening, dental inspection, and nutritional assessment)
 - Immunizations
 - Blood lead testing
 - Laboratory and other diagnostic testing
 - Health education and guidance to caregivers and children
 - Referrals for follow-up treatment
 - Referrals to the Special Supplemental Food Program for Women, Infants and Children (WIC) for children under five years of age and pregnant or lactating women
- Pregnancy care, sexually-transmitted disease screening, and routine gynecologic and urologic care;
- Substance abuse screening;
- Mental health screening;
- Neuro-developmental assessment;
- Post-assessment case conference;
- Preliminary report (to be completed on the day of the CHEC visit);
- Final evaluation report (to be completed within 14 days of the CHEC visit and forwarded to the caregiver, CP&P Worker, Medicaid HMO, and other involved health care providers).

Children presenting for these services -- are accompanied by one of the following:

- Caregiver;
- CP&P Worker;
- CP&P Case Aide;

Procedure for CHEC

4-23-2012

RESPONSIBILITY	ACTION REQUIRED
Caregiver/ Worker	<p>1. Schedule appointment with a designated CHEC provider for child to be seen within 30 days of initial placement.</p> <p>Note: Information regarding designated CHEC sites in participating counties can be obtained by calling the Office of Child and Family Health at 609-888-7110.</p>
Health Service Provider	2. Schedule appointment within 10 working days of request.
	3. Gather initial medical documentation from previous provider, school, pre-placement examination, and Worker to initiate medical record.
	4. Provide CHEC services.
	5. Complete the examination form.
	6. Provide the Worker and Caregiver with a preliminary report on the day of the CHEC visit.
	7. Prepare final evaluation report including plans of care within 14 days.
Health Care Coordinator (HCC)	8. Provide ongoing follow-up to ensure linkage to necessary primary and specialty services.